Transfer Form for Non-Enrolled (Dismissed) Participants

THIS DOCUMENT IS TO BE USED FOR PARTICIPANTS WHO HAVE BEEN DISMISSED AND WANT TO ENROLL AT A NEW DUI PROGRAM, AND ARE REQUESTING THAT THEIR CREDITS BE TRANSFERRED. THE RECEIVING PROGRAM SHOULD NOTIFY THE COURT OF THE PARTICIPANT'S ENROLLMENT, BUT IS NOT REQUIRED TO NOTIFY THE SENDING PROGRAM OF THE PARTICIPANT'S ENROLLMENT OR FAILURE TO ENROLL.

	PARTICIPANT II	VI ORWINITE	<i>5</i> 11	
Name				
First		dle Last		st
AddressStreet	C:4		Chaha	7:
	City		State	Zip
	Home	_ (Work	
	Drive	er's License #		
	COURT INFO	RMATION		
Address				
Docket / Case #	Conv	viction Date _	1' 11	
Attach copy of current	court reinstate order to nev	v program, if	applicable	
	PROGRAM INI	FORMATION	V	
Sending Program:		Receiving Program:		
Name:		Name:		
License #:		License #:		
Address:		Address: _		 -
Phone #:		Phone #		
	PROGRAM REQUIREM	MENTS COM	IPLETED	
Hours of Education		Face-to-Face Interviews		
Hours of Group Counseling				
	Assessment (Results)
Additional Pro	gram Requirements (if appl	icable)		
	ENROLLMENT I	NFORMATI	ON	
Program Type:	Wet Reckless			
	First Offender	,	th \square 6-month \square	,
F 11 1	Multiple Offender	`	nth \square 18-month	,
Enrolled:	on (Emploding time and OA	Dismissed	:	
	me (Excluding time on LOAnn:			
Auditionai Imormatio				

Date

Signature & Title of Program Representative